

## **Center Licensing Inspection Full Report**

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

| Program Details   |                     |                         |                    |  |
|---|---------------------|-------------------------|--------------------|--|
| Program Name  | Program Number      |                         | Program Type       |  |
| VIP Learning Center                                       | 2240030332          |                         | Child Care Center  |  |
| Address<br>6200 Busch Blvd Unit B Columbus<br>OH<br>43229 |                     |                         | County<br>FRANKLIN |  |
|   |                     |                         | ×                  |  |
| Building Approval Date                                    | Use Group/Code      | Occupancy Limit         | Maximum Under 2 ½  |  |
| 11/14/2018  | E                   | 78                      | 54                 |  |
| Fire Inspection Approval Date                             | Food Service Risk L | Food Service Risk Level |                    |  |
| 06/06/2024  | Level II            | Level II                |                    |  |

| Inspection Information |                                |                  |                   |              |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type        | Inspection Sc                  | ope              | Inspection Notice |              |
| Pre-license            | Full                           |                  | Unannounced       |              |
| Inspection Date        | Begin Time                     |                  | End Time          |              |
| 07/25/2024             | 11:00 AM                       |                  | 1:30 PM           |              |
| Reviewer:              |                                |                  |                   |              |
| Barbara Smith          |                                |                  |                   |              |
| Summary of Findings    |                                |                  |                   |              |
| No. Rules Verified     | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                     | 0                              | 0                | 0                 | 0            |

| License Capacity and Enrollment at the Time of Inspection |                  |            |           |       |
|---|------------------|------------|-----------|-------|
| Age Group   | License Capacity | Enrollment |           |       |
|   | Totals           | Full Time  | Part Time | Total |
| Infant ( Birth to < 18 m)                                 |                  | 0          | 0         | 0     |
| Young Toddler   |                  | 0          | 0         | 0     |
| Total Under 2 ½ Years                                     |                  | 0          | 0         | 0     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 0          | 0         | 0     |
| School Age  |                  | 0          | 0         | 0     |
| Total Capacity/Enrollment                                 |                  | 0          | 0         | 0     |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|--|-----------------|----------------|---------|
| Group  | Age Group/Range | Ratio Observed | Comment |

## **Summary of Non-Compliances**

If a program disagrees with a licensing finding, the program may request a review of the finding(s). Ohio Administrative Code 5101:2-12-03 and 5101:2-13-03 detail the process for submitting a request for review. The request for review must be submitted within seven business days from the receipt of the licensing report. In addition, if the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

| Serious Risk Non-Compliances  |
|---|
| No Serious Risk Non-Compliances were observed during this inspection  |
|   |
| Moderate Risk Non-Compliances   |
| No Moderate Risk Non-Compliances were observed during this inspection |
|   |
|   |
|   |
| Low Risk Non-Compliances  |
| No Low Risk Non-Compliances were observed during this inspection      |

| г | DESIGNING: |
|---|------------|
|   |            |
|   |            |
|   |            |

## Rules In-Compliance/Not Verified

| Rules In-Compliance/Not Verified |  |  |
|----------------------------------|--|--|
|                                  |  |  |
| 20                               |  |  |
| Status                           | Documenting Statement(s), If applicable    |  |
| Compliant                        | Documenting Statement: A copy of the       |  |
|                                  | certificate of occupancy was available on- |  |
|                                  | site for review.                           |  |
|                                  |  |  |
| Status                           | Documenting Statement(s), If applicable    |  |
| Compliant                        | Documenting Statement: Please Note:        |  |
|                                  | Documentation of a fire inspection         |  |
|                                  | without any uncorrected violations must    |  |
|                                  | be secured for the program. Secure a       |  |
|                                  | new fire inspection by 06/06/2025.         |  |
| - SANCE SEE                      |  |  |
|                                  | Documenting Statement(s), If applicable    |  |
| Compliant                        | Documenting Statement: The food service    |  |
|                                  | license was observed posted. Following is  |  |
|                                  | the audit number and date of expiration:   |  |
|                                  | Audit #9989897 expires 03/01/2025.         |  |
|                                  |  |  |
|                                  | Documenting Statement(s), If applicable    |  |
| Compliant                        | Documenting Statement: No changes          |  |
|                                  | have been made to the written policies     |  |
|                                  | and procedures since it was last approved  |  |
|                                  | by this Department.                        |  |
|                                  |  |  |
|                                  | Status<br>Compliant                        |  |



| Destruction                          |                |  |
|--------------------------------------|----------------|--|
| Rule                                 | Status         | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-08 Medical Statement | Compliant      | Documenting Statement: All employees   |
|                                      |                | had current medical statements on file.  |
|                                      |                |  |
|                                      | •              | · · · · · · · · · · · · · · · · · · ·  |
| Rule                                 | Status         | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-08 Orientation       | Compliant      | Documenting Statement: On the day of   |
| Training & Whistle Blower Protection | Compliant      | the inspection, all child care staff   |
| Training & Whistie Blower Froteetion |                | members had met orientation training   |
|                                      |                | The state of the s |
|                                      |                | requirements.  |
|                                      |                |  |
| Rule                                 | Status         | Documenting Statement(s) If anylimble  |
| 340,304,60                           | Indiana and an | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-09 Background Check  | Compliant      | Documenting Statement: During the  |
| Requirements                         |                | inspection, the required documentation   |
|                                      |                | regarding background checks was on file  |
|                                      |                | for all employees listed.  |
|                                      |                |  |
|                                      | -33.00         |  |
| Rule                                 | Status         | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-10 Health Training   | Compliant      | Documenting Statement: The program   |
| Requirements                         |                | had at least one Child Care Staff Member   |
|                                      |                | with currently valid training in First Aid,  |
|                                      |                | Management of Communicable Disease,  |
|                                      |                | CPR, and Child Abuse Prevention present  |
|                                      |                | and readily accessible during all hours of   |
|                                      |                | operation.   |
|                                      |                |  |
|                                      |                |  |
| Rule                                 | Status         | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-11 Outdoor Space     | Compliant      | Documenting Statement: The outdoor   |
| Requirements                         |                | play area is separated from traffic and  |
|                                      |                | other hazards by a fence.  |
|                                      |                | Strict Hazards by a ferrice.   |
| L                                    |                |  |
| Rule                                 | Status         | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-11 Outdoor Play      | Compliant      | Documenting Statement: Outdoor   |
| Equipment                            | Compilant      | equipment was viewed to be safe and  |
| Lydipilicit                          |                | free of rust, sharp points, and other  |
|                                      |                |  |
|                                      |                | hazards.   |
| Dula, F101,3 13 11 Out-land Dlank    | Campliant      | Decomposition Chaterrant All accidents   |
| Rule: 5101:2-12-11 Outdoor Play      | Compliant      | Documenting Statement: All equipment   |
| Equipment                            |                | was observed to be properly placed out of  |
|                                      |                | the path of the main traffic pattern.  |
|                                      |                |  |
| Rule: 5101:2-12-11 Outdoor Play      | Compliant      | Documenting Statement: The playground  |
| Equipment                            |                | safety kit was used to verify the outdoor  |
|                                      |                | play equipment was free from   |



|  |           | entrapment hazards and unsafe and protruding bolts.   |
|--|-----------|---|
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-11 Outdoor Play Fall                           | Compliant | Documenting Statement: The protective   |
| Zones  | compliant | material used under outdoor equipment was mulch.  |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-12 Safe Equipment                              | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding safe equipment were discussed.   |
| Rule: 5101:2-12-12 Safe Equipment                              | Compliant | Documenting Statement: Equipment was observed to be in good condition.  |
| P.J.   | Chatura   | Decree the Chateron and a life and ball   |
| Rule: 5101:2-12-13 Smoke Free                                  | Status    | Documenting Statement(s), If applicable  Documenting Statement: No smoking was  |
| Environment  | Compliant | allowed on the premises, and the notice stating that smoking is prohibited was observed posted in a conspicuous place.  |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant | Documenting Statement: On the day of<br>the inspection, the complete prescribed<br>JFS 01242 "Medical, Dental, and General<br>Emergency Plan For Child Care" were<br>posted in the program as required. |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 First Aid/Standard Precautions              | Compliant | Documenting Statement: During the inspection, the program had complete first aid kits available as required.  |
| Pode   | Chabin    | Decimandia - Chahaman (A) 15  |
| Rule Pulo F101/2 12 16 Management of                           | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Management of Communicable Disease          | Compliant | Documenting Statement: The JFS 08087 "Communicable Disease Chart" was posted and was readily available to staff and parents.  |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |

| Rule: 5101:2-12-17 Daily Schedule   | Compliant | Documenting Statement: Daily schedules were observed posted. |
|-------------------------------------|-----------|--|
|                                     | •         |  |
| Rule                                | Status    | Documenting Statement(s), If applicable                      |
| Rule: 5101:2-12-17 Materials and    | Compliant | Documenting Statement: Sufficient                            |
| Equipment                           |           | equipment was observed in all categories.                    |
| 1                                   |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable                      |
| Rule: 5101:2-12-20 Cribs            | Compliant | Documenting Statement: Cribs were                            |
|                                     |           | separated from the play space by a safe                      |
|                                     |           | and sturdy and physical barrier.                             |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable                      |
| Rule: 5101:2-12-08 Child Care Staff | Compliant | Documenting Statement: All Child Care                        |
| Member Educational Requirements     |           | Staff Members had verification of                            |
| ·                                   |           | educational requirements on file at the                      |
|                                     |           | program.   |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable                      |
| Rule: 5101:2-12-16 Written Disaster | Compliant | Documenting Statement: The program's                         |
| Plan                                | *         | written disaster plan was reviewed during                    |
|                                     |           | the inspection and met the requirements.                     |
| Rule: 5101:2-12-16 Written Disaster | Compliant | Documenting Statement: During the                            |
| Plan                                | Compliant | inspection, the requirements of the rule                     |
|                                     |           | regarding verification of education for                      |
|                                     |           | child care staff members were discussed.                     |
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|                                     |           |  |